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as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Tradamark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.78(b).								
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Assignee Name and Address: Roche Diagnostics Operations, Inc. 9115 Hapue Road Indianapolis, Indiana 46250								
A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.								
SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignce								
Signature	Don Michael	young			Date	Max	17,205	
Name	D. Michael Young	0 1			Telephor	ne 317-	-521-7340	
Title	Assistant Secreta	ry						
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